

Workmen's Circle/Arbeter Ring Response to Interim Recommendations of the Citizens' Health Care Working Group (CHCWG)

The Citizens Health Care Working Group was created by the Medicare Modernization Act of 2003, to provide an opportunity for the American public to “engage in an informed national debate to make choices about the services they want covered, what health coverage they want, and how they are willing to pay for coverage.” After an extensive process which included community meetings across the country and internet polling of citizens, the CHCWG has issued a set of Interim Recommendations and invited comment on them.

The Workmen's Circle/Arbeter Ring, a more than one-hundred year old national Jewish membership organization has reviewed these Interim Recommendations and offers the following response:

Recommendation 1: Guarantee financial protection against very high health care costs including protection against very high out-of-pocket medical costs for everyone and financial protection for low income individuals and families.

We were heartened when the initial Interim Recommendations of the Working Group called for a comprehensive plan that would provide affordable coverage for all. It is therefore a severe disappointment to see the revised Recommendations present as their lead recommendation, cover for only “catastrophic” costs. Without the kind of access to primary and preventive services that a comprehensive system would offer, the health of increasing numbers of our citizens will be endangered. The levels of subsequent high-cost care could well increase as a result. A system that facilitates access to low-cost primary care will reduce the need for the high-cost services that this recommendation addresses.

Further, the concept of providing special financial protections for low-income persons suggests that this will be a means-tested system. We believe that everyone should have access to health care without having to facing such demeaning examinations of their finances. Experience has shown that such measures are administratively complex and costly as well.

Recommendation 2: Support integrated community health networks including support for the nation's health care safety net.

Integrated community health networks are an efficient, community-supportive way of providing health care services. However, the emphasis in this recommendation on maintenance and support of the “safety net” seems to assume continuation of the current inequitable two-class system of care in which millions of uninsured and under-insured individuals and families lack access to the mainstream of medical care. We would hope that the Working Group would support proposals, as it did initially, that would help the nation end this inequity and provide health coverage for everyone.

Recommendation 3: Promote efforts to improve quality of care and efficiency.

We strongly support this recommendation. We believe there are many examples in the Medicare program and the Veterans Health Administration program that show how the quality of care can be improved and measured.

Recommendation 4: Fundamentally restructure the way palliative care, hospice care and other end-of-life services are financed and provided.

We strongly support this recommendation as well. We are a humane society, and we should make sure that our people are treated humanely throughout their lives, including at the end of life.

Recommendation 5: It should be public policy that all Americans have affordable health care.

We applaud this recommendation but, as we have stated, are disappointed that it has been relegated to 5th place, and that the goal of achieving access for all Americans by the year 2012 has been abandoned. This should be the governing principle that guides all the other elements of a decent health program for this country. We were encouraged that an entity created by the U.S. Government was supporting the concept of universal health care, the principle that everyone in this country should have access to the health care they need without facing financial barriers that would discourage them from seeking care. **We strongly urge that this principle be returned to its place of prominence from which all other considerations flow.** The Workmen's Circle has long supported this concept. We believe it is long past time for the United States to move toward this goal, which every other advanced country has already achieved.

We do not, however, accept the idea, which the CHCWG supports, that Americans should have access to only a "core" set of services, with the wealthy able to buy their way into more services. Other, less wealthy countries have shown that comprehensive services can be made available to everyone without creating such a two-class system. An American system should also provide access to a comprehensive set of services, without bias or exclusion.

We believe there should be a universal, government-financed system of national health insurance that will make health care available to everyone. This country has the financial means to do this; in fact, many studies show that we can do this without spending any more than now.

Recommendation 6: Define a "core" benefit package for all Americans.

As we have stated above, we do not accept the concept of this recommendation. Experience with Medicare in this country, and with the health systems of many other countries, has shown that comprehensive benefits can be provided without excessive spending and without creating a two-class system, one for those who can afford only "core" services and another for those who can afford to buy more. This country should move as quickly as possible to such a system.